

City of Detroit Special Events Application

Successful events are the result of advance planning, effective communication and teamwork. You are required to complete the information below so that the City of Detroit can gain a thorough understanding of the scope and needs of the event. This form must be completed and returned to the City of Detroit Clerk's Office at least 60 days prior to the first day of the event. If submitted later than 60 days prior, application is subject to denial. Please type or print clearly and attach additional sheets or maps as needed.

Section 1- GENERAL EVENT INFORMATION

Event Name: _____

Event Location: _____

Section 2- ORGANIZATION/APPLICANT INFORMATION

Organization Name: _____

Organization Mailing Address: _____

Business Phone: _____

Business Fax: _____

Federal Tax ID # _____

If registered as a non-profit, indicate non-profit ID number and attach a copy of the certificate.

Applicant Name: _____

Title/Role: _____

Email Address: _____

Mailing Address: _____

Business Phone: _____

Business Fax:: _____

Event On-Site Contact Person:

Mailing Address: _____

Business Phone: _____

Business Fax: _____

List name/phone number of person(s) authorized to make decisions for the organization/event (indicate role/responsibility).

List Event Sponsors: _____

Event Elements (check all that apply)

☐ Walkathon

☐ Carnival/Circus

☐ Concert/Performance

☐ Run/Marathon

☐ Bike Race

☐ Religious Ceremony

☐ Political Event

☐ Festival

☐ Filming

☐ Parade

☐ Sports/Recreation

☐ Rally/Demonstration

☐ Convention/Conference

☐ Fireworks

☐ Other: _____

- Restricted Times for Parade in the Central Business District are: Monday – Friday 7:00 AM – 10:00 AM; Noon – 2:00 PM; 4:00 PM – 6:00 PM. And Special Events or Sporting Events.

- Applicants must reimburse the City of Detroit for costs associated with their Special Event, including but not limited to Detroit Police Department, Detroit Fire Department, Detroit Public Works, Health & Wellness Department, Building & Safety and Business License.

What are the projected set-up, event and tear down dates and times (must be completed)?

Begin Set-up Date & Time: _____ Complete Set-up Date & Time: _____

Event Start Date & Time: _____ Event End Date & Time: _____

Begin Tearing Down Date: _____ Complete Tear Down Date: _____

Event Times (If more than one day, give times for each day): _____

Is this the first time you have held this event in the City of Detroit? ☐ Yes ☐ No

If no, what years has the event been held in Detroit? _____

When was the event last held in Detroit? _____

Where was the event last held in Detroit? _____

What were the hours last year? _____

Project Attendance This Year (Minimum – Maximum)? _____

What is the basis for your projected attendance? _____

Please describe your anticipated/ target audience:

Is this going to be an annual event? ☐ Yes ☐ No

If yes, do you have a preferred/proposed for next year? _____

If a parade is planned. Indicate elements (check all that apply):

[] People [] Balloons
[] Floats [] Animals
[] Vehicles [] Other: _____
[] Bands

If animals included, specify type, number and how used. _____

Name of business supplying animal(s): _____

Contact Person: _____

Address: _____ Phone: _____

City/State/Zip: _____

Section 3- LOCATION/SITE INFORMATION

Location of Event: _____

Facilities to be used (circle): Street Sidewalk Park City Facility

Please attach a site plan which illustrates the anticipated layout of your event including the following:

- | | |
|-----------------------------------|--|
| -Public entrance and exit | -Location of First Aid |
| -Location of merchandising booths | -Location of fire lane |
| -Location of food booths | -Proposed route for walk/run |
| -Location of garbage receptacles | -Location of tents and canopies |
| -Location of beverage booths | -Sketch of street closure |
| -Location of sound stages | -Location of bleachers |
| -Location of hand washing sinks | -Location of press area |
| -Location of portable restrooms | -Sketch of proposed light pole banners |

Section 4- ENTERTAINMENT

What type of entertainment will be used? (check all that apply)

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Singers | <input type="checkbox"/> Magician |
| <input type="checkbox"/> Musicians | <input type="checkbox"/> Story Telling |
| <input type="checkbox"/> Comedians | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Speakers | |

Describe the entertainment for this year's event:

List proposed entertainers and/or bands performing at the event:

Will a sound system be used? ☐ Yes ☐ No

If yes, what type of sound system?

- ☐ Acoustic-audible, sound heard within natural range
☐ Amplified-augmented, sound increased to broaden range

The amplified sound will be used:

Will the event consist of a musical concert? ☐ Yes ☐ No

If yes, what type of music? (check all that apply)

- ☐ Live ☐ Recorded ☐ Karaoke/Lip-synch

Describe specific power needs for entertainment and/or music:

How many generators will be used?

How will the generators be fueled?

Name of vendor providing generators:

Contact Person:

Address:

Phone:

City/State/Zip:

Section 5- COMMUNICATION/ADVERTISING STRATEGY

Check all applicable boxes that describe the type of promotion you plan to use to attract participants:

- ☐ Radio (Specify stations):
☐ Television (Specific stations):
☐ Newspapers (specify papers):
☐ Web site (identify web address):
☐ Public Relations or Marketing Firm (Specify):

Contact Info:

- ☐ Raffle (List Item(s)):
☐ Billboards
☐ Posters
☐ Flyers
☐ Street Banners
☐ Other (specify): _____

NOTE: All raffles subject to laws of State/City.

Section 6- SALES INFORMATION

Will there be advanced ticket sales? ☐ Yes ☐ No

If yes, please describe: _____

Will there be on-site ticket sales? ☐ Yes ☐ No

If yes, list price(s): _____

Will food be sold? ☐ Yes ☐ No

If yes, please pick up Special Events Vendor Packet in Suite 105: _____

Will merchandise be sold? ☐ Yes ☐ No

If yes, describe: _____

Will a percentage of the proceeds be distributed to a charitable organization? ☐ Yes ☐ No

If yes, describe: _____

If the event is a fundraiser, identify charity or recipient of funds: _____

Will there be vending or sales? ☐ Yes ☐ No

If yes, check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> Food | <input type="checkbox"/> Merchandise |
| <input type="checkbox"/> Non-Alcoholic Beverages | <input type="checkbox"/> Alcoholic Beverages |
| <input type="checkbox"/> Other (specify): _____ | |

Indicate type of items to be sold: _____

Will these be exclusive vendors or outside vendors? (please describe): _____

Section 7- PUBLIC SAFETY & PARKING INFORMATION

Name of Private Security Company: Existing park contract security will be used.

Contact Person: _____

Address: _____

Phone: _____

City/State/Zip: _____

Number of Private Security Personnel Hired Per Shift: _____

Are the private security personnel (check all that apply):

☐ Licensed ☐ Armed ☐ Bonded

Describe the emergency evacuation plan: _____

Describe the parking plan to accommodate anticipated attendance: _____

How will you advise attendees of parking options? _____

Are you seeking a group parking rate? _____

Section 8- COMMUNITY IMPACT INFORMATION

How will your event impact the surrounding community (i.e. pedestrian traffic, sound carryover, safety)?

Have local neighborhood groups/businesses approved your event?

☐ Yes

☐ No

Indicate what steps you have or will take to notify them of your event:

Indicate contact names and phone numbers (for verification) or attach approved letter(s):

Section 9- EVENT SET-UP

Complete the appropriate categories that apply to the event.

Structure

How Many?

Size/Height

Booth

Tent (enclosed on 3 sides)

Canopy (open on all sides)

Staging/Scaffolding

Bleachers

Company:

Grill

☐ Gas

☐ Charcoal

☐ Electrical

☐ Propane

Fireworks (Pyrotechnics)

☐ Aerial

☐ Stage

Provide Sketch:

Portable Restrooms:

☐ Standard

☐ ADA Accessible

Vehicles

Type/Weight:

Other:

NOTE: Specific requirements must be met and special approval must be received by the Detroit Fire Department.

Will additional electrical wiring need to be installed? Specify locations, voltage, amperage, and phase.

Will additional utility services be used (power, water, etc.)? Please describe.

Do you plan a fireworks display? List dates, time, location, vendor, and attach certificate of insurance.

Section 10- COMPLETE ALL THAT APPLY

Name of Sanitation Company collecting refuse and garbage?

Contact Person: _____

Address: _____

Phone: _____

City/State/Zip _____

Name of company providing emergency medical services?

Contact Person: _____

Address: _____

City/State/Zip: _____

Name of company providing porta-johns.

Contact Person: _____

Address: _____

Phone: _____

City/State/Zip: _____

Name of private catering company?

Contact Person: _____

Address: _____

Phone: _____

City/State/Zip: _____

SPECIAL USE REQUESTS

List any streets or possible streets you are requesting to be closed. Include the day, date, and time of requested closing and reopening. Neighborhood Signatures must be submitted with application for approval.

Attach a map or sketch of the proposed area for closure.

STREET NAME: _____

FROM _____

TO _____

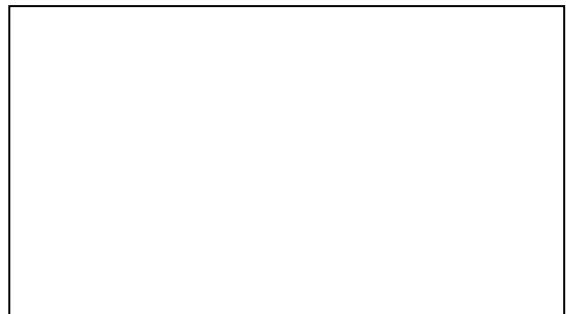
Closure Dates: _____

Beg. Time: _____

End Time: _____

Reopen Date: _____

Time: _____



STREET NAME: _____

FROM _____
TO _____

Closure Dates: _____
Beg. Time: _____
End Time: _____
Reopen Date: _____
Time: _____

STREET NAME: _____

FROM _____
TO _____

Closure Dates: _____
Beg. Time: _____
End Time: _____
Reopen Date: _____
Time: _____

STREET NAME: _____

FROM _____
TO _____

Closure Dates: _____
Beg. Time: _____
End Time: _____
Reopen Date: _____
Time: _____

Requested City Equipment

Provided In: _____ (year)

Current Request: _____ (year)

Street Closures:

- | | |
|---|--|
| <input type="checkbox"/> Posting no parking signs | <input type="checkbox"/> Light pole |
| <input type="checkbox"/> Electrical Services | <input type="checkbox"/> Storage for Trailers/Trunks |

Barricades are not available from the City of Detroit.

ADDITIONAL INFORMATION

Is there any additional information that you feel is important to mention regarding your event or additional requests?

AUTHORIZATION & AFFADAVIT OF APPLICANT

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief that I have read, understand and agree to abide by the rules and regulations governing the proposed Special Event, and I understand that this application is made subject to the rules and regulation established by the Mayor or the Mayor's designee. Applicant agrees to comply with all other requirements of the City, County, State, and Federal Government and any other applicable entity, which may pertain to Special Events. I further agree to abide by these rules, and further certify that I, on behalf of the Event agree to be financially responsible for any costs and fees that may be incurred by or on behalf of the Event, to the City of Detroit.

Signature of Applicant

Date

NOTE: Completion of this form does not constitute approval of your event. Pending review by the Special Events Management Team, you will be notified of any requirements, fees, and/or restrictions pertaining to your event.

COMMUNITY IMPACT SIGNATURE FORM

Page(s) ____ of ____

All information must be legible and the business/resident name(s) must be included. The signature form is required for business (es) and resident(s) within full or single lane closures, business (es)/residential properties within 300 ft on all sides from the closure perimeter, if parking equipment in front of business (es)/residential properties and if events are within a residential community/block.

On, _____ from _____ to _____; _____ is scheduled to take place at
(Date) (Time) (Time) (Event Name)

_____. We will have streets closed for _____ day (s).
(Address) (Qty)

By signing, I verify that I have read the notification letter. I do not have any objections to the Special Events activity referenced above.

Business/Resident Name	Address	Print Name	Signature	Date Signed

The list above will be checked randomly for credibility. Any false information will be addressed and the Special Event Permit may be revoked. If a residential property, the owner or tenant must sign. If a business, the owner or manager must sign. Signatures of minors are not acceptable.

By signing, I verify that the information above is true and confirmed.

Authorized Signature-Applicant: _____ Date: _____

SPECIAL EVENTS CONTACT LIST

Department/Agency	Contact Person	Email Address	Phone Number
Building & Safety Department			(313)224-3259
Business License Department	Yakeima Fife	fifeya@detroitmi.gov	(313)224-0365
Campus Martius Park	Heather Badrak		(313) 962-0112
Clean Detroit	Ryan Epstein		(313) 354-1276
Coleman A. Young International Airport	Tyra Williams		(313) 833-7666
Detroit Police Department – Tactical Operations – Large Special Events and Parades in Downtown Area.	Sgt. Janae Stinson	Stinsonj251@detroitmi.gov	(313)237-2828
Detroit Police Department – Liquor License Division – 24 Hour Temporary Liquor License			(313) 596-1954
Detroit Fire Department	Capt. Eric Davis	daviser@detroitmi.gov	(313)596-2932
Detroit People Mover	Ericka Alexander	ealexander@thepeoplemover.com	(313)224-2148
Detroit Public Works – Right of Way Fees	Leslie Lord	lordl@cadtwr.ci.detroit.mi.us	(313)224-3935
Detroit Riverfront Conservancy			(313)566-8200
Eastern Market			(313)833.9300
Health & Wellness Department – Food License and Permits	Denise Talley-Ndiaye	talleyd@detroitmi.gov	(313)870-2729
Municipal Parking Department – Parking Meters Rentals	Linda Harris	harrisli@detroitmi.gov	(313)221-2520
Municipal Parking Department – Parking Lots/Garages	Angela Nash	nasha@detroitmi.gov	(313)221-2527
Mayor’s Office – Film, Culture and Special Events	Sommer Woods	woodss@detroitmi.gov	(313)224-1606
Recreation Department – Belle Isle Park	Tracy Lawrence	lawrenct@detroitmi.gov	(313) 628-2081
Recreation Department – Fort Wayne		fortwayneinfo@detroitmi.gov	(313) 628-0796
Recreation Department – Hart Plaza	Howard Nash	hnash@detroitmi.gov	313-877-8074
Recreation Department – (Excludes Hart Plaza, Belle Isle and Fort Wayne)	Lynn Shaw	lshaw@detroitmi.gov	(313) 877-8075

2011 CITY OF DETROIT SPECIAL EVENTS FEE SCHEDULE

(Fees are subject to change without notice)

Department	Service Description	Fee
Business License	Business License Permit – Any goods that will be sold on the public right of way must obtain a permit per vendor. This includes dry goods, merchandise, food or beverage.	\$115 per point of sale. Late applications will be assessed late fees. Fee is waived if vendor is distributing materials complimentary. Example of fee waivers: Organizations passing out literature.
Building & Safety Engineering	Permit for Temporary Signage, electrical/generator, bleachers and tents larger than 10x10.	Fees Vary
Detroit Fire Department	Tent Inspection (not per tent) – tents less than or equal to 10x10.	\$111 / first hour / \$56 each add'l hr
Detroit Fire Department	Tent Inspection (not per tent) – larger than or equal to 10x10.	\$186 / first hour / \$56 each add'l hr
Detroit Fire Department	Fire Hydrant Deposit	\$210
Detroit Fire Department	Fire Hydrant Permit – 10 day minimum	\$75 / day
Detroit Police Department	Police Officer – (Four (4) Minimum per officer) Min. Detail is Three (3) Officers and One (1) Supervisor	\$38.38 / hr
Detroit Police Department	Supervisor – Four (4) hour minimum	\$49.03 /hr
Detroit Police Department	NO – PARKING Signs	\$1.50 per sheet
Detroit Police Department – Liquor License Unit	24 Hour Liquor License applications must be obtained from the State of Michigan website.	
Detroit Public Works	Barricades	A security deposit may be applicable.
Detroit Recreation Department		Fees Vary, refer to website www.detroitmi.gov for additional information.
Detroit Public Works – City Engineering	Right of Way (ROW) Permit – ROW Fee is applicable if applicant is charging a fee to an event on a public right of way.	\$400 per eight (8) hours / \$1,200 for 24 hour permit
Health & Wellness Department	Temporary Food License	\$250 per point of sale (Non Profits can be considered for discount permit fee). Late applications will be assessed a late fee. Fee is waived if vendor is distributing food complimentary, but an application must be completed. Example of fee waiver: food bank
Municipal Parking Department	Meter – if a street closure includes parking meters, the meter must be reserved for the day.	\$20 per day

**2011 SPECIAL EFFECTS/PYROTECHNICS
DETROIT FIRE DEPARTMENT
FEE SCHEDULE**
(Fees are subject to change without notice)

Department	Service Description	Fee
Detroit Fire Department	Fireworks / Explosive Storage – 1 – 100 LBS	\$157 per day
Detroit Fire Department	Fireworks / Explosive Storage – 101- 500 LBS	\$187 per day
Detroit Fire Department	Fireworks / Explosive Storage – 501 – 1,000 LBS	\$214 per day
Detroit Fire Department	Fireworks / Explosive Storage – 1,001 – 5,000 LBS	\$240 per day
Detroit Fire Department	Fireworks / Explosive Storage – 5,001 – 10,000 LBS	\$269 per day
Detroit Fire Department	Fireworks / Explosive Storage – OVER 10,000 LBS	\$297 per day
Detroit Fire Department	Fireworks/Pyrotechnics – Escort /Transport Explos Insp & Permit (RENEW)	\$223
Detroit Fire Department	Fireworks/Pyrotechnics – Escort /Transport Explos Insp & Permit (NEW)	\$445
Detroit Fire Department	Fireworks/Pyrotechnics – Fireworks Transport Permit (1-100 lbs)	\$129
Detroit Fire Department	Fireworks/Pyrotechnics – Fireworks Transport Permit (Over 100 lbs)	\$240
Detroit Fire Department	Fireworks/Pyrotechnics – Fireworks Display Witness	\$241
Detroit Fire Department	Fireworks/Pyrotechnics – Field Inspection	\$111
Detroit Fire Department	Plan Review - FBHR	\$116 / hr
Detroit Fire Department	On-Site Inspection / Review	\$111 / hr
Detroit Fire Department	Certificate of Fitness – One (1) year	\$56
Detroit Fire Department	Certificate of Fitness – Three (3) year	\$69
Detroit Fire Department	Chief	\$130 / hr
Detroit Fire Department	Safety Officer	\$130 /hr
Detroit Fire Department	Engine	\$130/hr
Detroit Fire Department	Ladder Truck	\$130 / hr
Detroit Fire Department	Squad / T.M.S	\$130 / hr
Detroit Fire Department	E.M.S.	\$130 /hr
Detroit Fire Department	Duty Officer	\$130 / hr
Detroit Fire Department	Manufact/Wholesale Pkgs/Stor Flam Liquid <51 GALS	\$73
Detroit Fire Department	Manufact/Wholesale Pkgs/Stor Flam Liquid 51-100 GALS	\$130
Detroit Fire Department	Manufact/Wholesale Pkgs/Stor Flam Liquid 101 – 1,000 GALS	\$270
Detroit Fire Department	Manufact/Wholesale Pkgs/Stor Flam Liquid 1,001 – 5,000 GALS	\$325
Detroit Fire Department	Manufact/Wholesale Pkgs/Stor Flam Liquid 5,001 – 20,000 GALS	\$395
Detroit Fire Department	Manufact/Wholesale Pkgs/Stor Flam	\$506

	Liquid 20,001 – 100,000 GALS	
Detroit Fire Department	Manufact/Wholesale Pkgs/Stor Flam Liquid >100,001 GALS	\$1,093
Detroit Fire Department	Gas Storage – 3K-13k CU Ft	\$408
Detroit Fire Department	Gas Storage – 13,001-25K CU Ft	\$424
Detroit Fire Department	Gas Storage – Over 25K CU Ft	\$520
Detroit Fire Department	Gas Storage – Over 25K CU Ft	Detroit Fire Department
Detroit Fire Department	Gas Storage – One (1) Torch Unit	\$21
Detroit Fire Department	Gas Storage – Temp Instal of Flam Compressed Liquid Gas	\$111
Detroit Fire Department	Consultation	\$111 / first hour / \$56 each add'l
Detroit Fire Department	Miscellaneous Request	\$111 /hr